

96359104  
IN CALIFORNIA, CALL 1-800-852-

FAC	TRANSPORTER		<b>GENERATOR</b>

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address				A. State Manifest Document Number							
MC DONNELL DOUGLAS REALTY CO. 4060 LAKEWOOD BLVD., 6TH FLOOR LONG BEACH, CA 90803				96359104							
4. Generator's Phone ( ) 527-3014				B. State Generator's ID							
5. Transporter 1 Company Name				C. State Transporter's ID							
6. US EPA ID Number				D. Transporter's Phone							
7. Transporter 2 Company Name				E. State Transporter's ID							
8. US EPA ID Number				F. Transporter's Phone							
9. Designated Facility Name and Site Address				G. State Facility's ID							
10. US EPA ID Number				H. Facility's Phone							
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers		13. Total Quantity		14. Unit Wt/Vol		I. Waste Number	
a.				No. Type						State	
b.										EPA/Other	
c.										State	
d.										EPA/Other	
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above							
FRIABLE ASBESTOS CONTAINING WASTE				03							
15. Special Handling Instructions and Additional Information											
SITE ADDRESS: 19503 S. NORMANDIE, TORRANCE, CA 90502 CST JOB#97-109A ASBESTOS REQUIREMENT 40 CFR 61 (BAGGED, SEALED, & LABELED) ERG# 31 EMERGENCY RESPONSE: 714-991-8300											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.											
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.											
Printed/Typed Name				Signature				Month Day Year			
JOHN MARASCO				John Marasco				02/14/97			
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature				Month Day Year			
Thomas Blossin				Thomas Blossin				02/14/97			
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature				Month Day Year			
James Tomlinson				James Tomlinson				02/14/97			
19. Discrepancy Indication Space											
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.											
Printed/Typed Name				Signature				Month Day Year			
Darin T. Olson				Darin T. Olson				02/14/97			

**DO NOT WRITE BELOW THIS LINE.**

Yellow: TSDf SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS.  
(Generators who submit hazardous waste for transport out-of-state,  
produce completed copy of this copy and send to DTSC within 30 days.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address MC DONNELL DOUGLAS REALTY CO. 4050 LAKEWOOD BLVD., 6TH FLOOR LONG BEACH, CA 90808 4. Generator's Phone ( ) 827-3014		6. US EPA ID Number C A T 0 0 0 5 2 4 2 4 7		A. State Manifest Document Number 96359104	
5. Transporter 1 Company Name MP ENVIRONMENTAL		8. US EPA ID Number C A D 0 0 6 9 1 3 2 0 6		B. State Generator's ID 0 1 2 1 4 9 7	
7. Transporter 2 Company Name UNION PACIFIC TRANSPORTATION		10. US EPA ID Number U T C 0 9 3 0 1 2 2 0 1		C. State Transporter's ID 0 0 5 3 9 3 1 1 5 1	
9. Designated Facility Name and Site Address BODC ENVIRONMENTAL 1111 WEST HWY 123 EAST CARBON, UT 84520		12. Containers No. Type 801 C M 00024		D. Transporter's Phone 800-576-3444	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number) a. RG ASBESTOS, 9, NA2212, PG III b. c. d.		13. Total Quantity 00024		E. State Transporter's ID 0 0 5 3 9 3 1 1 5 1	
1. Additional Descriptions for Materials Listed Above FRIABLE ASBESTOS CONTAINING WASTE		14. Unit Wt/Vol Y		F. Transporter's Phone 800-576-3444	
15. Special Handling Instructions and Additional Information SITE ADDRESS: 19503 E. NORMANDIS, TORRANCE, CA 90502 ASBESTOS REQUIREMENT 40 CFR 61 (BAGGED, SEALED, & LABELED) EMERGENCY RESPONSE: 714-991-8300 CST JOB#37-109A PAGE 31 BINF 200-205		16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.  If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.		K. Handling Codes for Wastes Listed Above a. b. c. d.	
Printed/Typed Name JOHN MARASCO		Signature John Marasco		Month Day Year 012 14 97	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name THOMAS BLISSIN		Signature Thomas Blissin		Month Day Year 012 14 97	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name		Signature		Month Day Year	

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